

# Wisconsin Medicaid and BadgerCare update

July 2001 • No. 2001-10

PHC 1791

## Wisconsin Medicaid and BadgerCare Information for Providers

To:

School-based  
Services  
Providers

HMOs and Other  
Managed Care  
Programs

## New reimbursement method and documentation requirements for school-based services transportation

Wisconsin Medicaid has established a new method for reimbursing and documenting school-based services (SBS) transportation. The new policy will be effective for services provided on and after August 1, 2001. Clarification regarding coverage of transportation services is also included in this *Update*.

### New reimbursement method requirements

For transportation services provided on and after August 1, 2001, school-based services (SBS) providers will be required to use a new procedure code for a daily base rate that includes the first 20 miles traveled for the day. For all miles over the 20-mile daily base rate, providers will also be required to use a new per mile procedure code.

This new method will simplify documentation needed for reimbursement of SBS transportation services provided to Medicaid-eligible children. SBS providers will use only the new daily base rate procedure code for most SBS transportation services, eliminating the need to document miles traveled.

Effective August 1, 2001, reimbursement for unloaded mileage is included in the new daily base rate and new per mile rate. Do not include unloaded mileage, such as trips to and/or from the bus barn without the child, in the calculation of total reimbursable miles traveled for the day.

Only miles to and/or from a school-based service will be reimbursed. For example, if a child receives a school-based service outside of school and does not also receive a school-based service in school, the miles from home to school cannot be included in the total miles traveled that day. Refer to Child A in Attachment 1 of this *Update*.

## Procedure codes

### *Old procedure code*

Procedure code W6073, special transport, per mile, will no longer be valid for dates of service on and after August 1, 2001. However, for dates of service *prior* to August 1, 2001, providers are required to continue to use procedure code W6073 and follow the rules outlined in the chart in *Update 98-13*.

### *New procedure codes*

School-based services providers are required to use the procedure codes in the table below on claims for transportation services provided on and after August 1, 2001:

## Reason for rate change

Medicaid's new transportation rates are based on cost data gathered from surveys and cost reports from a sampling of school districts and Cooperative Educational Service Agencies. Therefore these transportation rates closely reflect the actual costs incurred by SBS providers. Basing rates on cost data is consistent with Health Care Financing Administration (HCFA) rate-setting guidelines.

**P**rocedure code W6073, special transport, per mile, will no longer be valid for dates of service on and after August 1, 2001.

<b>New Procedure Codes for SBS Transportation Services Effective August 1, 2001</b>					
<b>Code</b>	<b>Description</b>	<b>Criteria</b>	<b>Units</b>	<b>Unit Rate</b>	<b>Medicaid Reimbursement (60% of Federal Share)</b>
W6074	SBS transportation daily base rate (first 20 miles included)	Use for each day for which transportation is covered by Medicaid. Includes the first 20 miles for the day. (Unloaded bus barn miles cannot be counted.)	1 unit = 1 day	\$28.43	\$10.11
W6075	SBS transportation per mile rate (for miles over 20-mile base)	Use when documenting for all miles over the 20-mile daily base rate for the day. (Unloaded bus barn miles cannot be counted.)	1 unit = 1 mile (Round to the nearest whole or half unit.)	\$3.25	\$1.16

Reminder: The daily base rate includes the first 20 miles the child traveled for the day.

## Documentation requirements

Medicaid has simplified the documentation required from SBS providers.

For dates of service on and after August 1, 2001, the record for each child who receives SBS transportation is required to include the following (this information can be included in a trip log):

- The child's first and last name, and date of birth.
- The general service category (transportation).
- The dates of service that SBS-covered transportation was provided.
- Written verification that the child was in school and received a school-based service other than SBS transportation on the date the transportation was provided (e.g., a note or check box in the trip log that the child received a school-based service).
- The total number of miles, *only when seeking reimbursement for more than the 20-mile daily base rate for that day* (i.e., provider will also need to use procedure code W6075 for claims).
- The pick-up and drop-off locations, *only when seeking reimbursement for more than the 20-mile daily base rate for that day*. If the locations are home or school, these can be described in general terms, such as "home to school" or "school to home." If the school-based service is at a place other than the school, a more specific description including the name of the facility and street address is required.

## Clarification of covered transportation services

Wisconsin Medicaid reimburses SBS providers for transportation on days when a child is receiving a school-based service (other than transportation). **Medicaid covers only SBS transportation to and/or from a covered school-based service.** Types of services covered include any of the following:

- Transportation in a specialized medical vehicle (vehicle equipped with a ramp or lift) where the child requires a ramp or lift.
- Transportation in any vehicle where an aide is required to assist the child.
- Any transportation from school to an *off-site location* and back to school or home.

## Transportation services included in the Individualized Education Program only reimbursable under school-based services benefit

When transportation services are included in the child's Individualized Education Program (IEP), providers may seek reimbursement only under the school based services benefit. School-based transportation services as described in the IEP cannot be reimbursed to specialized medical vehicle or county common carrier providers.

- Specialized medical vehicle (SMV) – The SBS benefit does not reimburse SMV providers for these services.
- County common carrier – The SBS benefit does *not* reimburse for county common carrier transportation (paid for by a county or tribal agency).

## Examples of reimbursable SBS transportation services

The following are examples of how to document and submit claims for reimbursement using the new codes:

### *Child A - Over 20 miles: Example includes travel to non-school-based service site.*

A child is transported from home to school where no SBS-covered services were provided (18 miles), then from the school to a hospital (5 miles) where he receives a school-based service. The child is then taken home (18 miles) from the hospital. The total reimbursable mileage is 23 miles (5 miles from the school to the hospital and 18 miles from the hospital to home). The provider would use procedure code W6074 (daily base rate), then use procedure code W6075 (per mile rate) for three miles over the daily base rate. The provider cannot include the mileage from home to school in the total calculation of miles traveled that day because no Medicaid-covered school-based service was provided at the school that day. Medicaid covers only transportation to and from a covered service. Refer to Child A in Attachment 1.

The provider is required to document the total miles in a trip log or in the student's file.

For an example of how to complete a claim for Child A using the HCFA 1500 Claim Form, refer to Attachment 2.

### *Child B - Over 20 miles*

A child is transported from home to school (12 miles) where he receives a school-based service. The child is then taken home (12 miles). The total reimbursable mileage is 24 miles (12 miles from home to school and 12 miles from school to home). The provider would use procedure code W6074 (daily base rate), then use procedure code W6075 (per mile rate) for the four miles over the daily base rate. Refer to Child B in Attachment 1.

The provider is required to document the total miles in a trip log or in the student's file.

### *Child C - Under 20 miles*

A child is transported from home to school (6 miles) where she receives a school-based service. The child is then taken home (6 miles). The total reimbursable mileage is 12 miles (6 miles from home to school and 6 miles from school to home). The provider would use only procedure code W6074 (daily base rate). Refer to Child C in Attachment 1.

If you have any questions, please call Provider Services at (800) 947-9627 or (608) 221-9883.

*The Wisconsin Medicaid and BadgerCare Update* is the first source of program policy and billing information for providers.

Although the *Update* refers to Medicaid recipients, all information applies to BadgerCare recipients also.

Wisconsin Medicaid and BadgerCare are administered by the Division of Health Care Financing, Wisconsin Department of Health and Family Services, P.O. Box 309, Madison, WI 53701-0309.

For questions, call Provider Services at (800) 947-9627 or (608) 221-9883 or visit our Web site at [www.dhfs.state.wi.us/medicaid/](http://www.dhfs.state.wi.us/medicaid/).

# ATTACHMENT 1

## Examples of Medicaid-covered SBS transportation

(Procedure codes effective August 1, 2001)

**Child A** (Refer to Attachment 2 of this *Update* for an example claim form.)

School-based service other than transportation is provided at hospital.

Total miles traveled to and from a school-based service site:  $5 + 18 = 23$

*Claims submission:* The provider must use the following codes:

- Procedure code W6074 – daily base rate (1 unit).<sup>1</sup>
- Procedure code W6075 – three miles over the daily base rate (3 units).

*Note:* The provider can only be reimbursed for transportation from the school to the hospital and for the trip from the hospital to the home. The provider cannot be reimbursed for transportation from home to school because no Medicaid-covered school-based service was provided at the school.

### Child B

School-based service other than transportation provided at school.

Total miles traveled to and from a school-based service site:  $12 + 12 = 24$

*Claims submission:* The provider must use the following codes:

- Procedure code W6074 – daily base rate (1 unit).<sup>1</sup>
- Procedure code W6075 – four miles over the daily base rate (4 units).

### Child C

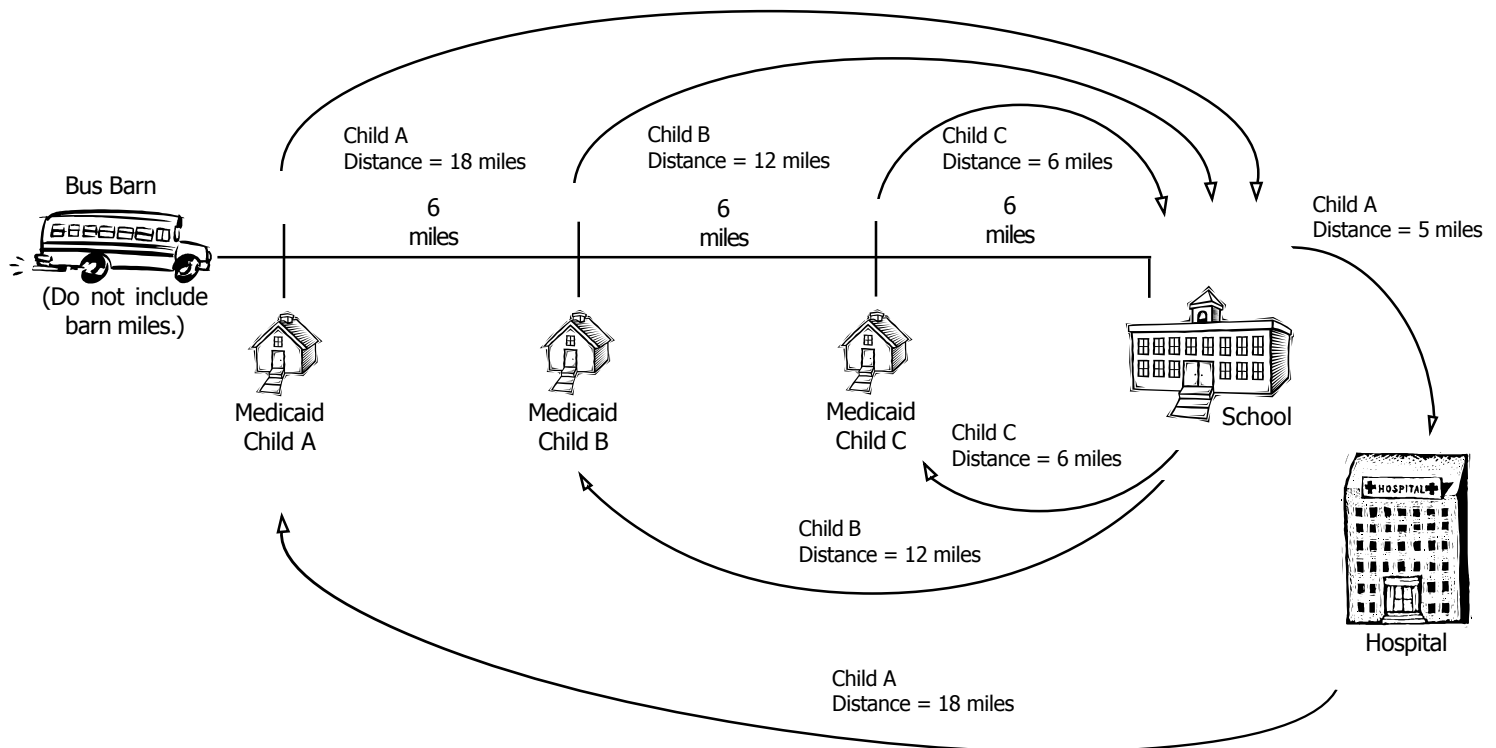
School-based service other than transportation provided at school.

Total miles traveled to and from a school-based service site:  $6 + 6 = 12$

*Claims submission:* The provider must use the following code:

- Procedure code W6074 – daily base rate (1 unit).<sup>1</sup>

### Transportation examples including daily base rate and per mile rate



**Note:** If the total number of miles is not documented in a child's record, a provider may only use procedure code W6074. Please refer to the documentation section in this *Update* and the SBS Handbook for complete documentation requirements.

<sup>1</sup>Daily base rate includes the first 20 miles the child traveled for the day.

CARRIER

PATIENT AND INSURED INFORMATION

PHYSICIAN OR SUPPLIER INFORMATION

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